ED315708 1990-00-00 Post-Traumatic Loss Debriefing: Providing Immediate Support for Survivors of Suicide or Sudden Loss. Highlights: An ERIC/CAPS Digest.

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Table of Contents

If you're viewing this document online, you can click any of the topics below to link directly to that section.

Post-Traumatic Loss Debriefing: Providing Immediate Support for Survivors of Suicide or Sudden Loss. Highlights: An ERIC/CAPS	
Digest	1
PROVIDING STRUCTURE DURING CHAOS	
STAGES OF POST-TRAUMATIC LOSS DEBRIEFING	. 2
REFERENCES	F



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Children's suicidal behavior is escalating as America's number one mental health concern. Suicide intervention and prevention within the context of the school-as-community does not end with a student's death. School counselors, administrators and mental health professionals need to develop systematic strategies to intervene with survivors, as well as potentially at-risk students.

The sudden, unexpected death by suicide or the sudden loss from an accidental death often produces a characteristic set of psychological and physiological responses among survivors. Persons exposed to traumatic events such as suicide or sudden loss often manifest the following stress reactions: irritability, sleep disturbance, anxiety, startle reaction, nausea, headache, difficulty concentrating, confusion, fear, guilt, withdrawal, anger, and reactive depression. The particular pattern of the emotional reaction and type of response will differ with each survivor depending on the relationship of the deceased, circumstances surrounding the death, and coping mechanisms of the survivors. The ultimate contribution of suicide or sudden loss intervention with survivor groups is to create an appropriate and meaningful opportunity to respond to suicide or sudden death.

PROVIDING STRUCTURE DURING CHAOS

Post-traumatic loss debriefing is a structured group process approach to help survivors manage their physical, cognitive and emotional responses to a traumatic loss. It creates a supportive environment to process blocked communication which often interferes with the expression of grief or feelings of guilt. It also serves to correct distorted attitudes toward the deceased, as well as discuss ways of coping with the loss. The purpose of the debriefing is to reduce the trauma associated with the sudden loss, initiate an adaptive grief process and prevent further self-destructive or self-defeating behavior. Post-traumatic loss debriefing is composed of seven stages: introductory stage, fact stage, life-review stage, feeling stage, reaction stage, learning stage, and closure. A debriefing should be organized 24 to 72 hours after the death. Natural feelings of denial and avoidance predominate during the first 24 hours. The debriefing can be offered to all persons affected by the loss, however, it is probably most effective with the immediate survivor group.

STAGES OF POST-TRAUMATIC LOSS DEBRIEFING

I. Introductory Stage: Introduce survivors to the debriefing process.



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- The counselor defines the nature, limits, roles and goals within the debriefing process.

- The counselor clarifies time limits, number of sessions, and confidentiality and strives to create a secure environment in which to share anxieties.
- II. Fact Stage: Information is gathered to "recreate the event" from what is known about it. During the fact phase, participants are asked to recreate the event for the counselor. The focus of this stage is on facts, not feelings.
- Group members are asked to make a brief statement regarding their relationship with the deceased, how they heard about the death, and circumstances surrounding the event. It is important that the group share the same story concerning the death and that secrets or rumors not be permitted to divide members from each other. Group processing of the death also provides the counselor with an opportunity to listen for any attributions of guilt, extreme emotional responses, or post-traumatic stress reactions.
- Survivors are encouraged to engage in a moderate level of self-disclosure, with counselor facilitated statements such as, "I didn't know...could you tell me what that was like for you?"

It is important for the counselor to: (1) try to achieve an accurate sense of the survivor's world; (2) be aware of the survivors' choice of topics regarding the death; (3) gain insight into their priorities for the moment; and (4) help survivors see the many factors which contributed to the death and to curtail self-blame.

This low initial interaction is a non-threatening warm-up and naturally leads into a discussion of feelings in the next stage. It also provides a climate in which to share the details of the death and to intervene to prevent secrets or rumors that may divide survivors.

- III. Life Review Stage: A life review of the deceased can be the next focus, if appropriate. Zinner (1987) maintains that a life review provides an opportunity for the group members to recount personal anecdotes about the deceased. The opportunity to share "remember when..." stories lessens tension and anxiety within the survivor group. This also serves to ease the acceptance of the helping professional by the group.
- IV. Feeling Stage: Feelings are identified and integrated into the process. At this stage, survivors should have the opportunity to share the burden of the feelings they are experiencing in a nonjudgmental, supportive and understanding manner. Survivors must be permitted to identify their own behavioral reactions and to relate to the immediate present, i.e., the "here and now."
- The counselor begins by asking feeling-oriented questions: "How did you feel when that happened?" and "How are you feeling now?" This is a critical component where survivors acknowledge that "things do get better" with time.



- Each person in the group is offered an opportunity to answer these and a variety of other questions regarding their feelings. It is important that survivors express thoughts of responsibility regarding the event and process the accompanying feelings of sadness.
- At this stage, as in others, it is most critical that no one gets left out of the discussion, and that no one dominates the discussion at the expense of others. All feelings, positive or negative, big or small, are important and need to be listened to and expressed. More importantly, however, this particular stage allows survivors to see that subtle changes are occurring between what happened then and what is happening now.
- V. Reaction Stage: This stage explores the physical and cognitive stress reactions to the traumatic event. Acute reactions can last from a few days to a few weeks. Selected post-traumatic stress reactions include nausea, distressing dreams, difficulty concentrating, depression, feeling isolated, grief, anxiety and fear of losing control.
- The counselor asks such questions as, "What reactions did you experience at the time of the incident?" and "What are you experiencing now?"
- The counselor encourages survivors to discuss what is going on in their school and/or work lives and in their relationships with parents, peers and teachers.
- VI. Learning Stage: This stage is designed to assist survivors in learning new coping skills to deal with their grief reactions. It is also therapeutic to help survivors realize that others are having similar feelings and experiences.
- The counselor assumes the responsibility of teaching the group something about their typical stress response reactions.
- The emphasis is on describing how typical and natural it is for people to experience a wide variety of feelings, emotions and physical reactions to any traumatic event. Adolescents, in particular, need to know that their reactions are not unique, but are universally shared reactions.
- Critical to this stage is being alert to danger signals in order to prevent destructive outcomes and to help survivors return to their pre-crisis equilibrium and interpersonal stability.

This stage also serves as a primary prevention component for future self-defeating or self-destructive behavior by identifying the normal responses to a traumatic event in a secure, therapeutic environment with a caring, trusted adult.

VII. Closure Stage: This final stage seeks to wrap up loose ends, answer outstanding questions, provide final assurances, and create a plan of action that is life-centered. Survivor groups often need a direction or specific shared activity after a debriefing to



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bring closure to the process. Discussion surrounding memorials are often suggested and need appropriate direction.

- Survivors should be aware that closure is taking place, therefore, no new issues should be introduced or discussed at this stage of the debriefing process.
- The counselor should: (1) examine whether initial stress symptoms have been reduced or eliminated; (2) assess the coping abilities of the survivors; and (3) determine if increased levels of relating to others and the environment have occurred, i.e., are the survivors genuinely hopeful regarding their immediate future? Are the survivors managing their lives more effectively?
- The group may also close by planning a group activity together such as a "living task," for example, going to a movie, concert, or similar activity to promote a sense of purpose and unity.

Ultimately, school counselors are in a unique position to guide intervention and postvention efforts when a suicide or sudden loss occurs. This debriefing procedure provides the critical component for restoring school/community equilibrium.

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survivorship. Journal of Counseling and

Development, 65(9), 499-501. ---- Rosemary Thompson, Ed.D., N.C.C. Supervisor of Primary Prevention and Early Intervention Programs Chesapeake Public Schools Chesapeake, Virginia 1990 ---- This publication was prepared with funding from the Office of Educational Research and Improvement, U.S. Department of Education, under contract no. RI88062011. The opinions expressed in this report do not necessarily reflect the positions or policies of OERI or the Department of Education.

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